

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: Prenatal Diagnosis Genetic Counselors
Managed Care Plans
CSO Administrators
Regional Administrators

Memorandum No: 02-44 MAA

Issued: June 7, 2002

For Information Call:
1-800-562-6188

From: Douglas Porter, Assistant Secretary
Medical Assistance Administration (MAA)

Supersedes: 01-18 MAA

Subject: Vendor Rate Increase for Prenatal Diagnosis Genetic Counseling

Effective for dates of service on and after July 1, 2002, the Medical Assistance Administration (MAA) will implement a legislatively appropriated one and one-half (1.5) percent vendor rate increase.

Maximum Allowable Fees

The 2001-2003 Biennium Appropriations Act authorizes this one and one-half (1.5) percent vendor rate increase for MAA fee-for-service programs.

Attached are replacement pages 13-14 for MAA's Prenatal Diagnosis Genetic Counseling Billing Instructions, dated October 2000. To obtain this fee schedule electronically, go to MAA's website at <http://maa.dshs.wa.gov> (click on the Provider Publications/Fee Schedule link).

Prenatal Diagnosis Genetic Counseling

- ✓ To an official of a penal or other custodial institution in which the patient is detained;
 - ✓ To provide directory information, unless the patient has instructed the health care provider not to make the disclosure;
 - ✓ In the case of a hospital or health care provider to provide, in cases reported by fire, police, sheriff, or other public authority, name, residence, sex, age, occupation, condition, diagnosis, or extent and location of injuries as determined by a physician, and whether the patient was conscious when admitted.
- A health care provider [must] disclose health care information about a patient without the patient's authorization if the disclosure is:
 - ✓ To federal, state, or local public health authorities, to the extent the health care provider is required by law to report health care information; when needed to determine compliance with state or federal licensure, certification or registration rules or laws; or when needed to protect the public health;
 - ✓ To federal, state, or local law enforcement authorities to the extent the health care provider is required by law;
 - ✓ To county coroners and medical examiners for the investigations of deaths;
 - ✓ Pursuant to compulsory process in accordance with RCW [70.02.060](#).

Notifying Clients of Their Right to Make Their Own Health Care Decisions

All Medicare-Medicaid certified hospitals, nursing facilities, home health agencies, personal care service agencies, hospices, and managed health care organizations are federally mandated to give all adult clients written information about their rights, under state law, to make their own health care decisions.

Clients have the right to:

- Accept or refuse medical treatment;
- Make decisions concerning their own medical care; and
- Formulate an advance directive, such as a living will or durable power of attorney, for their health care.

Fee Schedule

Rates are effective for dates of service on and after July 1, 2002.

Procedure Codes, Descriptions, and Fees

<u>State-Unique Procedure Code</u>	<u>Description</u>	<u>Maximum Allowable Fee</u>
9060M	Initial Consultation (limited)	\$28.33
9061M	Initial Consultation (intermediate)	39.65
9062M	Initial Consultation (comprehensive)	73.65
9063M	Initial Consultation (complex)	84.98
9065M	Follow-up Consultation (limited)	28.33
9066M	Follow-up Consultation (intermediate)	73.65
9067M	Follow-up Consultation (complex)	84.98



Note: Fees are subject to change annually as directed by the legislature.